POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM	Application Number	10/597,755
	Filing Date	May 22, 2007
	First Named Inventor	Vasant Jadhav
	Title	RNA Interference Mediated Inhibition of Gene Expression Using Multifunctional Short Interfering Nucleic Acid (siNA)
	Group Art Unit	1635
	Examiner Name	Kimberly Chong
	Attorney Docket Number	SIR-MIS-00004-US-PCT

I hereby revoke all previous powers of attorney given in the above-identified application.

I hereby appoint:

☒ Practitioners associated with the Customer Number [79693]
   OR
☐ Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

☐ The address associated with the above-mentioned Customer Number.

OR

☒ The address associated with Customer Number [79693]

OR

☐ Firm *or* Individual Name	Sirna Therapeutics, Inc.				
Address	1700 Owens Street, 4th Floor				
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City	San Francisco	State	CA	Zip	94158
Country	USA				
Telephone	415-814-7200		Fax	415-512-7022	

I am the:

☐ Applicant/Inventor.

☒ Assignee (s) of record of the entire interest. See 37 CFR 3.71.
   Statement under 37 CFR 3.73(b) is enclosed.

SIGNATURE of Applicant or Assignee of Record				
Signature	*[signature]*		Date	10/30/2008
Name	Peter Haeberli		Telephone	415-814-8491
Title and Company	Managing Assistant Counsel, Sirna Therapeutics, Inc. (wholly owned subsidiary of Merck & Co.)			

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature required, see below*.

☒ *Total of 1 ____ forms are submitted.

SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450